	Surveyor :	Konneth	ASSIGN	MENT (Office)		1101 2-0-1
ws)	From (Person):	sithara	of	Fe1	Date/Time:	4.9.19 3.59 p. M
	Estimated Cost	5 <u> </u>		Bill to:		
	OD TP/WS/TP RES/OD RES/EVA/INV/MV/CS To Inspect Vehicle No: SH C 5414× at Workshop m/s Trans-(ab			V i CS	Insured: SHA	8265A
					Tel:	6666
	of MO 2	Amt grut 63	,			
	Policy No:			Claim No: D	19005771 MP	SH
	Sum Insured:			Excess:		
	Make of Veh:			5 # >-16	D.O.A	318.2019
	(Client's Record	REP. / REV 24 HRS	unp"	5.9.2019	H.O.D.	dorsement:
		1.9.19 4.10 p. m	Person Coatac	ted. Zhe Wii	Vehicle IN	1
	Date/Time	Action/Instruction (V) Estin	nte		
		SH (5 414x -1	CC3/EQ116	012063/ KU9392	Don - 2	5/06/20/6
		SHA Z-LMA.	NA111/08	023184/5/	D.OA -16/1	1208
	alalia	Email preli	m.c.col	to fir		

25 day : Preli. Report Resurvey No. of Trip: Survey Fee: : Final Report Transportation: Date/Time, File Return to? 12/12/19 Typist : Site Insp (\$ Add Fee: S+RS, SI Interview (\$ Photos Tech. Invs (\$ Others Report Format: Lump Sum J.B.I: (\$ \$2400/= Weekend (\$ TOTAL



MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9 6 Raffles Quay #21-00 Singapore 049580 Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwitting Dept: 36 Robinson Road #16-01 City House Singapore 068877 Tel: (65) 6507 3848 Fax: (65) 6507 3849 www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date

03-09-2019

Our Ref No. D19005721MFSH

Accident Date

31-08-2019

Claim Type. Third Party

Insured Vehicle

SHA8265A

Third Party Vehicle. SHC5414X

Survey Location

NO. 2 ANG MO KIO STREET 63

Contact Person.

KEK ZHEWEI

Contact No.

62876666/0

Fax No. 62571330

Survey Type

WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:

Appointed

Surveyor

LKK AUTO CONSULTANTS PTE LTD

Contact Person

NA

Fax No. 68416315

Contact Number.

NA

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc: Workshop

TRANS-CAB AUTO SERVICES PTE LTD

Attention, NIL

Cc : TP Solicitor

NA

TP Solicitor Fax No. NA

Officer Incharge

SITHARA

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.

Yvonne Wong (LKK Auto)

From:

Ng Wai Yin <waiyin.ng@transcab.com.sg>

Sent:

Wednesday, December 11, 2019 5:02 PM

To:

Yvonne Wong (LKK Auto)

Cc:

'Jasmine Tan'

Subject:

FW: VEHICLE NO: SHC5414X DOA: 31/08/2019 -- AAD1909-022

Attachments:

SHC5414X ESTIMATE.pdf

Follow Up Flag:

Follow up

Flag Status:

Flagged

Dear Yvonne

Amount confirmed \$ 2,400 (before GST).

Thank You Best Regards, Ng Wai Yin

Finance Department TEL: 6603 1265 Ext.308

*** Please be reminded that all claims correspondence to be send to claims@transcab.com.sg

TRANS-CAB SERVICES PTE LTD No. 2 Ang Mo Kio Street 63

Singapore 569111

Tel: 6287 6666 Fax: 6287 7764

From: Yvonne Wong (LKK Auto) [mailto:yvonnewong@lkkauto.com]

Sent: Wednesday, 11 December, 2019 4:10 PM To: Ng Wai Yin <waiyin.ng@transcab.com.sg>

Cc: jasminetan@transcab.com.sg

Subject: VEHICLE NO: SHC5414X DOA: 31/08/2019

Hi Wai Yin

I check and confirm is L/S \$2400.00 @ 2.5 days repair.

Thank you.

Best Regards,

Yvonne Wong (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email: yvonnewong@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



This email has been checked for viruses by AVG antivirus software. $\underline{www.avg.com}$

Veron Chen (LKKAuto)

From:

Veron Chen (LKKAuto)

Sent:

Monday, 9 September 2019 8:48 AM

To:

'CWS Motor Claims'; SUR

Cc:

'Sithara'

Subject:

RE: SURVEY ASSESSMENT - D19005721MFSH/1-SHC 5414X

Attachments:

SHC 5414X PRELI ADVISED.pdf

Dear Sir/Madam,

Enclosed preliminary revised of vehicle SHC 5414X

Date of survey: 5/9/2019

Number of days (estimated): 2.5 days

Best Regards,

Veron Chen | Case Handler on behalf of Yvonne

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>

Sent: Wednesday, 4 September 2019 4:06 PM

To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>; SUR

<sur@lkkauto.com>

Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>

Subject: RE: SURVEY ASSESSMENT - D19005721MFSH/1

Dear Sir/Madam,

Thank you for your assignment.

Best Regards,

Summer Lee | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>

Sent: Wednesday, 4 September, 2019 3:59 PM

To: ASSIGNMENTS@LKKAUTO.COM

Cc: CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>; Sithara < Sithara@msfirstcapital.com.sg>

Subject: PRI: SURVEY ASSESSMENT - D19005721MFSH/1

Dear Sir/Mdm,

We refer to the above reference.

Please find attached the necessary documents for survey.

Kindly submit your report via CWS within the next 14 days.

Note: All the accident reports are uploaded into CWS for your perusal.

Best Regards, Admin Team Claim Workflow System Motor Claims Department MS First Capital Insurance Limited

Tel: 6507 3848 Fax: 6507 3849

PS: This is a system generated mail. Please do not reply to this mail.

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref:

D19005721MFSH

Our ref:

CS/FCI19015673/Kyf3

Date: 9/9/2019

The Motor Claims Department

MS FIRST CAPITAL INSURANCE LTD

WITHOUT PREJUDICE

Dear Sir/Madam,

INITIAL INSPECTION REPORT OF VEHICLE NO. SHC 5414X

We thank for your instruction on 4/9/2019

Please be informed that we had conducted the inspection of the above mentioned vehicle on 5/9/2019 at the premises of M/s TRANS-CAB AUTO SERVICES PTE LTD and have the following to report:-

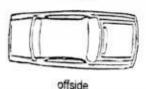
Workshop Estimate Amount	: S\$32,825.29		
Revised Estimate Amount	: S\$3,009.64		
"Check" Items Amount	: S\$		
Market Value	: S\$		
LTA Reimbursement Value	: S\$		
Nett Value	: S\$		

Description of Damage:

The vehicle sustained damages at the

rear portion

nearside rear



front

Comments/Present Status:

Damages Consistent

Yours faithfully,

Kenneth Kong

Licensed Appraiser

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT	
Date Of Report	02/09/2019 15:29	
Date Of Accident	31/08/2019 13:35	
Exact Location Of Accident	SHEARES LINK	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	 -
Vehicle Registration Number	SHC5414X	

	Title second		20200
Insur	ad/Pa	icumo	Idor
IIIoui	eu l		nuci

Name Of Registered Owner

TRANS-CAB SERVICES PTE LTD

200303878K

Email Address

Co Reg No

CLAIMS@TRANSCAB.COM.SG

Mobile Phone No

Alternative Phone No

OFFICE-62876666

Vehicle Particulars

Manufacturer

RENAULT

Model

LATITUDE-2.0 D DCI (A)

Exact Purpose for which vehicle was being used at

time of accident

HIRE AND REWARD

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

TAXI

Insurance Company

Name of Insurance Company

AXA INSURANCE PTE LTD

Type Of Coverage

THIRD PARTY

Fleet Policy

YES

Policy Number

VFX/P1680520

Cover Note Number

Driver

Name of Driver

HENG SOON HUAT RAPHAEL

NRIC No Date Of Birth S0192092H 29/07/1954

Occupation Date Of Driving Pass OUTDOOR 11/04/1978

Driving Experience

41 YEARS AND 4 MONTHS

Gender

MALE

Mobile Number

(LOCAL) +65-83288088

Fax Number

Contact Number

EMail Address

NOEMAIL

BLK 642C PUNGGOL DRIVE Address

#14-361

Postcode 823642

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

NO

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

2

Passenger 1

NAME:

: PEI SHI

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

ON 31/08/2019 AT ABOUT 1335HRS, I WAS STATIONARY ALONG SHEARES LINK DUE TO HEAVY TRAFFIC. I SUDDENLY FELT AN IMPACT FROM THE REAR OF MY TAXI. VEHICLE B(SHA8265A) HAS FAILED TO STOP IN TIME AND COLLIDED ONTO THE REAR OF MY TAXI.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

Details of Witness 1

Name

PEI SHI

Phone Number

91398956

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHA8265A

Vehicle Make/Model/Colour

CITY CAB

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (IV) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, Javvs or court orders.

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2 Pg. 1

	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
BS) V		
(2) (C)		
	> Towards	ECP
	AT A SES	2 5/1
		SHA 8-654 E
	SHCS414X	THE SOLAT
	Charles Links	
ESCRIBE GIRCUMSTANC	LO OF THE ACCIDENT	12
00000		A CONTRACT OF THE CONTRACT OF
	W-20	
	- Company	
**		
- 135	2011-00-00	1900 11
11.0		
22.00		
	Refer to GIA Report.	
DECLARATION We declare the foregoing pa	Refer to GIA Report.	
		71
	orticulars are true iff every respect	Reporting Centre Personnel's Signature

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	Terrice
Owner ID Type:	Company
Owner ID:	878K
Vehicle Details	(C/CIC)
Vehicle No.:	SHC5414X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	02 Sep 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2014
Engine No.:	M9R8839C002003
Chassis No.:	VF1ABL15AUC279619
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	04 Nov 2014
First Registration Date:	04 Nov 2014
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	03 Nov 2022
PARF Rebate Amount:	\$9,373.00
Intended COE Rebate Details	
COE Expiry Date:	03 Nov 2022
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$51,337.00
COE Rebate Amount:	\$20,338.00
Total Rebate Amount: Message	\$29,711.00
Please note that the 8-year COE for this vehicle cannot it	be further renewed. The vehicle must be de-registered upon COE expiry or when the

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 02 Sep 2019

ОК

Trans	-cab Auto Services Pte Ltd		AAD1909-022
	Ang Mo Kio Street 63 Singapore 569111		
	: 6287 6666 Fax No. : 6257 1330		
	T Reg. No. 201019626G		
SHC 54	414X		
31	1 BOOT SWITCH	\$	∫ _{113.00} χ
32	1 BOOT LOCK	\$	1 246.60 ×
33	1 BOOT LOCK CATCH	\$	n 41.70 ⊀
34	1 EXHAUST REAR	\$	7 5,263.60 X
35	1 EXHAUST CAP REAR	\$	√ 125.40 \(√
		TOTAL \$	14,945.86
		10% \$	1,494.59
		\$	13,451.27
	Special Nett		1000
1 15	ET PARKING AID	\$	Shar 700.00 Gown
2 15	ET REAR BUMPER CLIP	\$	مر 66.00 _
3 1S	ET BUMPER BRACKET CTR CLIP	\$	1 33.00 <u> </u>
4 1S	ET BUMPER BRACKET SIDE CLIP RH RR	\$	10.00 X
5 1S	ET BUMPER RETAINER RH CLIP RR	\$	~~ 20.00 X
6 15	ET BUMPER BRACKET SIDE CLIP LH RR	\$	2 × 10.00 ×
7 1S	ET BUMPER RETAINER CLIP LH RR	\$	~~ 20.00 X
8 1S	ET BUMPER LOWER REAR RIVET	\$	22.00 X
9 15	ET BUMPER LOWER REAR CLIP	\$	rec 66.00 C
10 1	BOOT STICKER "Trans-cab"	\$	1 30.00 _
11 1	BOOT STICKER "6555-3333"	\$	May 30.00 -
12 1	EXHAUST MOUNTING REAR	\$	54 17.82 7
13 2	REAR WINDSCREEN SEALANT	\$	~~ 80.00
14 1	WINDSCREEN MOULDING	\$	100.00
15 1	REAR WINDSCREEN INNER SPONGE SEAL	\$	100.00
16 1	BOOT INNER TRIM CLIP	\$	~~ 45.00 > X
17 1S	ET BOOT FINISHER CLIP	\$	~~ 24.20 /
18 1	TAILLAMP CLIP LH	\$	5.00
19 1	TAILLAMP CLIP RH	\$	~~ 5.00)
20 1	Rear Bumper Protector	\$	ne 100.00 for
		TOTAL \$	1,484.02
	то	TAL PARTS \$	14,935.29
	LABOUR		
	To transfer of bootlid fittings, attachments a	and	
	perform water seepage test.	\$	~ 170.00 X
	To Rust-Proofing Of The Affected Areas.	\$	~~ 170.00 ×

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111

Tel No.: 6287 6666

Fax No.: 6257 1330

CO./GST Reg. No. 201019626G

SHC 5414X

Not Nothank

AAD1909-022

Vehicle No.:

Chassis No.:

Vehicle Make:

Vehicle Model:

Date of Accident :

Third Party Insurer:

Date of Registration:

SHC 5414X

VF1ABL15AUC279619

RENAULT

LATITUDE

31.8.19

FCIL

4/11/2014

		PART	LIST
1	1	BUMPER COVER REAR	\$ LIST An 561.70
2	1	BUMPER LOWER REAR	\$ cm 411.90 -
3	1	BUMPER BRACKET CTR REAR	\$ 5 ≤ 98.10 X
4	1	BUMPER BRACKET SIDE RH REAR	\$ P⊾ 82.10 ×
5	1	BUMPER RETAINER RH REAR	\$ ∫ ₄ 59.80 X
6	1	BUMPER REFLECTOR RH	\$ N.C (ch)16.60 X
7	1	BUMPER BRACKET SIDE LH REAR	\$ In 80.80 x
8	1	BUMPER RETAINER LH REAR	\$ 54.20 ★
9	1	BUMPER REFLECTOR LH	\$ 16.60 X
10	1	BUMPER BEAM REAR	\$ By 547.80
11	1	BUMPER BEAM BRACKET LH REAR	\$ N 114.50
12	1	BUMPER BEAM BRACKET RH REAR	\$ N 100.90
13	1	OUTER PANEL REAR (End Panel)	\$ n 745.80
14	1	OUTER PANEL REAR (End Panel) TRIM	\$ Pm 404.56
15	1	TAILLAMP RH	\$ ∫ 313.10
16	1	TAILLAMP PANEL RH	\$ 7 401.40
17	1	TAILLAMP LH	\$ 54 401.40 X
18	1	TAILLAMP PANEL LH	\$ A 401.40
19	1	BOOT REAR	\$ N 1,677.20
20	1	BOOT FINISHER	\$ Su 344.70
21	1	BOOT WHEATERSTRIP	\$ √ _{178.20}
22	1	BOOT REFLECTOR LAMP LH	\$ Sa 277.70
23	1	BOOT REFLECTOR LAMP RH	\$ Sm 277.70)
24	1	BOOT BADGE 'RENAULT'	\$ na 82.40 -
25	1	BOOT BADGE	\$ Ma 95.80 -
26	1	BOOT STRUT LH	\$ <i>P</i> ₅ 145.10 χ
27	1	BOOT STRUT RH	\$ S 145.10 x
28	1	BOOT HINGE LH	\$ √ 254.20 ×
29	1	BOOT HINGE RH	\$ N 253.80 ⊀
30	1	BOOT INNER TRIM BOARD	\$ Sh 611.00 X

05 SEP 2019

Trans-cab Auto Services Pte Ltd

No. 2 Ang Mo Kio Street 63 Singapore 569111 Tel No. : 6287 6666 Fax No. : 6257 1330

Tel No. : 6287 6666 Fax No. : 6257 1330 CO./GST Reg. No. 201019626G

SHC 5414X

AAD1909-022

and realign centre exhaust pipe. the Repairer of the following: • To resurvey beforefulter spray pointing	TOTAL _	\$ \$		170.00	X
To drop rear exhaust box, renew the sar	me, to repair				^
To repair and realign rear exhaust pipe.		\$		170.00	v - (
Putty and spray painting of the affected	portion.	\$	7,!	500.00	4801
Labour charge to mount and dismount bench, to facilitate repair.	0.505	\$	4	380.00	X
To transfer of rear bumper fittings, attac perform water seepage test.		\$	4	380.00	X
alignment		s	ל	220.00	X
bodywork repair. To check steering geometry and compu		\$	4	170.00	X
To transfer of rear windscreen glass to t					
To transfer of rear end panel fittings, at perform water seepage test.		\$	nı	170.00	X
Panel Beating, Knocking And Straighter Necessary Portion, Remove And Renew Adjust And Realign The Same	al Of Parts,	\$	7,	500.00	3001
To reinstall rear bumper parking sensor	7.	\$		170.00	601
To transfer of tire, rim and on wheel ba	lancing.	\$	in	170.00	X
To remove and refit interior fittings, trir fittings and other, to enable repair.		\$	an	380.00	X
To Check Electrical Lighting Concerned	r.	\$		170.00	15%



51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

			nationale Des Experts En Autor	mobile			
MS	FIRST CAPITAL I	NSURANCE LTD	Ref : CS/FCI190156	373/Kyf3s2			
	ROBINSON ROAD -01 CITY HOUSES	SINGAPORE 068877	Date: 24-12-2019 Code: FCI2				
١.		Policy Particul	ars :- THIRD PARTY CLA	.IM			
	Insured Veh.	SHA 8265A	Veh. Inspected	SHC 5414X			
	Policy No.		Coverage (\$)	0.00			
	Claim No.	D19005721MFSH	Excess (\$)	0.00			
	Assign From	SITHARA	Assign Date	04/09/2019			
		Vehicle Pa	articulars & Condition				
	Make & Model	RENAULT LATITUDE (A)	c.c	1995			
	Engine No.	HIDDEN	Year of Reg.	2014			
	Chassis No.	VF1ABL15AUC279619	Colour	METALLIC WHITE / RED			
	Odometer	636361	Steering	IN ORDER			
	Brakes	IN ORDER	Modification	NIL			
	General	GOOD					
		Con	ditions of Tyres				
		Size	Make	Balance			
	R/H Front Tyre	215/60 R16	SAILUN	9 mm			
	L/H Front Tyre	215/60 R16	SAILUN	9 mm			
	R/H Rear Tyre	215/60 R16	GITI	8 mm			
	L/H Rear Tyre	215/60 R16	GITI	8 mm			
		Description of Damages					
	THE VEHICLE SU	STAINED DAMAGES AT THE	REAR PORTION.				
	DAMAGES SEE D	ETAILS.					
		Gen	eral Information				
	Accident Date	31/08/2019	Inspection Date	05/09/2019			
	Survey held at	TRANS-CAB AUTO SERVIC	ES PTE LTD				
		NO.2 ANG MO KIO ST 63 SINGAPORE 569111					
a.			Remarks				
	B)THE INSPECTION	ISISTENT TO ACCIDENT REP ON WAS CONDUCTED ON A"V CE TO YOUR INSTRUCTIONS	WITHOUT PREJUDICE" BAS	IS. ED REPAIRS.			
b.			ate Days of Repair	The state of the state of			
	ESTIMATED NOR	MAL PERIOD FOR REPAIR:	2.500 Working	Davs			



51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

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ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHC 5414X

Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	BUMPER COVER REAR	BUCKLED	561.70	561.70
1	BUMPER LOWER REAR	CRACKED	411.90	411.90
1	BUMPER BRACKET CTR REAR	SERVICEABLE	98.10	
1	BUMPER BRACKET SIDE RH REAR	SERVICEABLE	82.10	
1	BUMPER RETAINER RH REAR	SERVICEABLE	59.80	
1	BUMPER REFLECTOR RH (CRACKED)	NOT CONSISTENT WITH THE IMPACT	16.60	
1	BUMPER BRACKET SIDE LH REAR	SERVICEABLE	80.80	
1	BUMPER RETAINER LH REAR	SERVICEABLE	54.20	
1	BUMPER REFLECTOR LH	SERVICEABLE	16.60	
1	BUMPER BEAM REAR	BENT	547.80	547.80
1	BUMPER BEAM BRACKET LH REAR	TO REPAIR SEE LABOUR	114.50	-
1	BUMPER BEAM BRACKET RH REAR	TO REPAIR SEE LABOUR	100.90	
1	OUTER PANEL REAR (END PANEL)	TO REPAIR SEE LABOUR	745.80	12-
1	OUTER PANEL REAR (END PANEL) TRIM	SERVICEABLE	404.56	
1	TAILLAMP RH	SERVICEABLE	313.10	
1	TAILLAMP PANEL RH	TO REPAIR SEE LABOUR	401.40	-
1	TAILLAMP LH	SERVICEABLE	401.40	
1	TAILLAMP PANEL LH	TO REPAIR SEE	401.40	Ø
1	BOOT REAR	TO REPAIR SEE LABOUR	1,677.20	-
1	BOOT FINISHER	SERVICEABLE	344.70	-
1	BOOT WEATHERSTRIP	SERVICEABLE	178.20	
1	BOOT REFLECTOR LAMP LH	SERVICEABLE	277.70	12
1	BOOT REFLECTOR LAMP RH	SERVICEABLE	277.70	
	BOOT BADGE 'RENAULT'	NECESSARY	82.40	82.40
	BOOT BADGE	NECESSARY	95.80	95.80
1	BOOT STRUT LH	SERVICEABLE	145.10	-

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	BOOT STRUT RH	SERVICEABLE	145.10	
1	BOOT HINGE LH	TO REPAIR SEE LABOUR	254.20	
1	BOOT HINGE RH	TO REPAIR SEE LABOUR	253.80	
1	BOOT INNER TRIM BOARD	SERVICEABLE	611.00	
1	воот switch	SERVICEABLE	113.00	
1	BOOT LOCK	TO REPAIR SEE LABOUR	246.60	
1	BOOT LOCK CATCH	TO REPAIR SEE LABOUR	41.70	
1	EXHAUST REAR	TO REPAIR SEE LABOUR	5,263.60	
1	EXHAUST CAP REAR	TO REPAIR SEE LABOUR	125.40	
	LESS 10% DISCOUNT		-1,494.59	-169.96
			13,451.27	1,529.64
	SPECIAL NETT ITEMS			
1	SET PARKING AID (SN)	SHORTED	700.00	400.00
1	SET REAR BUMPER CLIP (SN)	NECESSARY	66.00	66.00
1	SET BUMPER BRACKET CTR CLIP (SN)	NECESSARY	33.00	33.00
1	SET BUMPER BRACKET SIDE CLIP RH RR (SN)	NOT NECESSARY	10.00	
1	SET BUMPER RETAINER RH CLIP RR (SN)	NOT NECESSARY	20.00	
1	SET BUMPER BRACKET SIDE CLIP LH RR (SN)	NOT NECESSARY	10.00	
1	SET BUMPER RETAINER CLIP LH RR (SN)	NOT NECESSARY	20.00	
1	SET BUMPER LOWER REAR RIVET (SN)	NOT NECESSARY	22.00	
1	SET BUMPER LOWER REAR CLIP (SN)	NECESSARY	66.00	66.00
1	BOOT STICKER "TRANS-CAB" (SN)	NECESSARY	30.00	30.00
1	BOOT STICKER "6555-3333" (SN)	NECESSARY	30.00	30.00
1	EXHAUST MOUNTING REAR (SN)	SERVICEABLE	17.82	
2	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	80.00	
1	WINSCREEN MOULDING (SN)	NOT NECESSARY	100.00	
1	REAR WINDSCREEN INNER SPONGE SEAL (SN)	NOT NECESSARY	100.00	
1	BOOT INNER TRIM CLIP (SN)	NOT NECESSARY	45.00	
1	SET BOOT FINISHER CLIP (SN)	NOT NECESSARY	24.20	

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Qty	Description of Parts	Condition	Estimate By Workshop (\$))	Our Adjusted (\$)
1	TAILLAMP CLIP LH (SN)	NOT NECESSARY	5.00	
1	TAILLAMP CLIP RH (SN)	NOT NECESSARY	5.00	
1	REAR BUMPER PROTECTOR (SN)	NECESSARY	100.00	40.00
	LABOUR		1,484.02	665.00
	TO TRANSFER OF BOOTLID FITTINGS, ATTACHMENTS AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	(J
	TO RUST-PROOFING OF THE AFFECTED AREAS.	NOT NECESSARY	170.00	
	TO CHECK ELECTRICAL LIGHTING CONCERNED.	ACRES (40.00 A) A 2 (40.00 A) A (40.00 A)	170.00	15.00
	TO REMOVE AND REFIT INTERIOR FITTINGS, TRIMINGS, GARNISH, FITTINGS AND OTHER, TO ENABLE REPAIR.	NOT NECESSARY	380.00	-
	TO TRANSFER OF TIRE, RIM AND ON WHEEL BALANCING.	NOT NECESSARY	170.00	16
	TO REINSTALL REAR BUMPER PARKING SENSOR.		170.00	60.00
	PANEL BEATING, KNOCKING AND STRAIGHTENING THE NECESSARY PORTION, REMOVE AND RENEWAL OF PARTS, ADJUST AND REALIGN THE SAME. INCLUSIVE OF THE REPAIR OF BUMPER BEAM BRACKET LH REAR, BUMPER BEAM BRACKET RH REAR, OUTER PANEL REAR (END PANEL), TAILLAMP PANEL RH, TAILLAMP PANEL LH, BOOT REAR, BOOT HINGE LH, BOOT HINGE RH, BOOT LOCK, BOOT LOCK CATCH, EXHAUST REAR AND EXHAUST CAP REAR.		7,500.00	300.00
	TO TRANSFER OF REAR END PANEL FITTINGS, ATTACHMENT AND PERFORM WATER SEEPAGE TEST.	NOT NECESSARY	170.00	
	TO TRANSFER OF REAR WINDSCREEN GLASS TO FACILITATE BODYWORK REPAIR.	NOT NECESSARY	170.00	-
	TO CHECK STEERING GEOMETRY AND COMPUTER WHEEL ALIGNMENT.	NOT NECESSARY	220.00	17
	TO TRANSFER OF REAR BUMPER FITTINGS, ATTACHMENT AND PERFORM WAER SEEPAGE TEST.	NOT NECESSARY	380.00	<u> </u>
	LABOUR CHARGE TO MOUNT AND DISMOUNT VEHICLE ON JIG BENCH, TO FACILITATE REPAIR.	NOT NECESSARY	380.00	-
	PUTTY AND SPRAY PAINTING OF THE AFFECTED PORTION.		7,500.00	440.00
1	TO REPAIR AND REALIGN REAR EXHAUST PIPE.	NOT NECESSARY	170.00	69
	TO DROP REAR EXHAUST BOX, RENEW THE SAME, TO REPAIR AND REALIGN CENTRE EXHAUST PIPE.	NOT NECESSARY	170.00	(ē)
			17,890.00	815.00

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GRAND TOTAL	32,825.29	3,009.64
RECOMMENDED COST OF LUMP SUM REPAIRS		2,400.00
(TO ITS PRE-ACCIDENT CONDITION)		

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KSC

KONG SENG CHEONG

Licensed Appraiser

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